Case 22-08901 Doc 11 Filed 08/22/22 Entered 08/22/22 22:41:27 Desc Main Document Page 1 of 25

		Document	Page 1 of 25		
Fill in this informa	ation to identify your ca	se and this filing:			
Debtor 1	Sabrina Lofton				
Dobto! !	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the: N	IORTHERN DISTRICT OF ILL	INOIS		
Case number 23	0.0004				— • • • • • • • • • • • • • • • • • • •
Case number	2-08901		_		Check if this is ar amended filing
					ag
o	1001/5				
Official For	m 106A/B				
Schedule	A/B: Prope	erty			12/15
Answer every questing Part 1: Describe E. 1. Do you own or hat I was not	on. ach Residence, Building, L ve any legal or equitable in the property? our Vehicles or or have legal or equitable, in s. If you lease a vehicle,	able interest in any vehicles, also report it on Schedule G. It vehicles, motorcycles	Own or Have an Interest In g, land, or similar property?	e red or not? Include any v	
Model: A		Who has an interest in t □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 □ At least one of the det	2 only		laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
		Check if this is comr		\$7,000.00	\$7,000.00
Examples: Boats No ☐ Yes Add the dollar pages you have	, trailers, motors, person	(see instructions) /s and other recreational vehal watercraft, fishing vessels, such as the second of the second	nicles, other vehicles, and snowmobiles, motorcycle and the first state of the first stat	d accessories ccessories y entries for	\$7,000.00
		le interest in any of the follo	wing items?		Current value of the portion you own?

claims or exemptions.

Page 2 of 25 Document Debtor 1 Case number (if known) 22-08901 Sabrina Lofton 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... \$1,000.00 Ordinary Household Furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... Ordinary Household Electronics \$1,000.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No ■ Yes. Describe..... \$500.00 Wearing Apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$500.00 Ordinary Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,000.00 for Part 3. Write that number here

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Debtor 1 Case number (if known) 22-08901 Sabrina Lofton Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Chime \$5.00 17.1. Checking **PNC** \$0.00 17.2. Checking **US Bank** \$50.00 17.3. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: Yes. Rent Landlord \$2,500.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No

Issuer name and description.

☐ Yes.....

Debtor 1 Case number (if known) 22-08901 Sabrina Lofton 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim.......

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Page 5 of 25 Document Case number (if known) 22-08901 Debtor 1 Sabrina Lofton 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2.555.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$7,000.00 57. Part 3: Total personal and household items, line 15 \$3,000.00 Part 4: Total financial assets, line 36 58. \$2,555.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$12,555.00 Copy personal property total \$12,555.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$12,555.00

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Fill in this info	rmation to identify your	case:		
Debtor 1	Sabrina Lofton			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number	22-08901			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2. Additional Page as necessary. On the top of any additional pages, write your name and

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

Pa	rt 1: Identify the Property You Claim as I	Exempt						
1.	Which set of exemptions are you claiming	? Check one only, ever	n if your spouse is filing with you.					
■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11							
2.	For any property you list on Schedule A/E	For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.					
	Ordinary Household Furnishings	\$1,000.00	\$1,000.00	735 ILCS 5/12-1001(b) }				
	Line from Schedule A/B: 6.1		100% of fair market value, up to					

001104410712					
Ordinary Household Furnishings Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b) }	
Line IIom Schedule A/D. G. I			100% of fair market value, up to any applicable statutory limit		
Ordinary Household Electronics Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
Line Holli Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit		
Wearing Apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
Line Holli Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
Ordinary Jewelry Line from Schedule A/B: 12.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)	
Ellie Holli Gonedale A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
Checking: Chime	\$5.00		\$5.00	735 ILCS 5/12-1001(b)	
Line from Goriedale AVD. 11.1			100% of fair market value, up to any applicable statutory limit		

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De	Sabrina Loiton		Case number (ii known)	22-00901		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
	Checking: US Bank Line from Schedule A/B: 17.3	\$50.00	= _	\$50.00	735 ILCS 5/12-1001(b)	
	Line Holli Schedule AVB. 17.3			0% of fair market value, up to y applicable statutory limit		
	Rent: Landlord Line from Schedule A/B: 22.1	\$2,500.00		\$1,445.00	735 ILCS 5/12-1001(b)	
ı	Line Holli Schedule AVD. 22.1			0% of fair market value, up to y applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and eve			on or after the date of adjustmen	t.)	
	Yes. Did you acquire the property cov	vered by the exemption wi	ithin 1,215	days before you filed this case?	•	
	□ No		•			

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Fill in this info	rmation to identify you						
Debtor 1	Sabrina Lofton						
Debtor 1	First Name	Middle Name Last Na	me		.		
Debtor 2							
(Spouse if, filing)	First Name	Middle Name Last Na	me				
United States E	Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLINOIS					
Case number	22-08901						
(if known)						_	t if this is an
						amend	ded filing
Official Fo	rm 106D						
		ร Who Have Claims Secเ	ırad	hy Proport	.,		12/15
Schedule	b. Creditors	Willo Have Claims Sect	<u> </u>	by Propert	<u>y</u>		12/15
	the Additional Page, fill it	If two married people are filing together, both out, number the entries, and attach it to this fo					
•	rs have claims secured b	y your property?					
☐ No. Che	eck this box and submit	this form to the court with your other schedul	les. You	have nothing else	to report o	on this form.	
_	in all of the information	•		J			
		below.					
Part 1: List	All Secured Claims			Column A	Column	D	Column C
		more than one secured claim, list the creditor sepa s a particular claim, list the other creditors in Part 2		Amount of claim		of collateral	Unsecured
		ical order according to the creditor's name.	73	Do not deduct the	that sup	pports this	portion
2.1 Credit A	cceptance	Describe the property that secures the claim		value of collateral. \$15,180.00	claim	\$7,000.00	If any \$8,180.00
Creditor's Na	<u> </u>	2016 Nissan Altima 185000 miles	<u> </u>	φ13,100.00		Ψ1,000.00	ψο, 100.00
Attn: Ba	nkruptcy	2010 Missail Altinia 100000 miles					
	lest 12 Mile Road						
Ste 3000	0	As of the date you file, the claim is: Check all t apply.	nat				
Southfie	eld, MI 48034	☐ Contingent					
Number, Stre	eet, City, State & Zip Code	☐ Unliquidated					
		☐ Disputed					
Who owes the	debt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only		☐ An agreement you made (such as mortgage	or secur	ed			
☐ Debtor 2 only		car loan)					
☐ Debtor 1 and	Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's l	ien)				
	of the debtors and another	☐ Judgment lien from a lawsuit	•				
☐ Check if this community	claim relates to a debt	Other (including a right to offset)					
	Opened						
	06/22 Last						
	Active						
Data daht was is	2011Fred 7/14/22	Loot 4 digita of account number 7	325				

\$15,180.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$15,180.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill	in this informa	ation to identify your	case:	Boodinen	r age o or z			
Del	otor 1	Sabrina Lofton						
		First Name	Middl	le Name	Last Name			
	otor 2 ouse if, filing)	First Name	Middl	le Name	Last Name			
Uni	ted States Ban	kruptcy Court for the:	NORTHE	ERN DISTRICT OF ILL	INOIS			
Car	se number 22	2 00004						
	nown)	2-08901					_	k if this is an ded filing
Off	ficial Form	106E/F						
Sc	hedule E/	F: Creditors W	/ho Hav	e Unsecured	Claims			12/15
any Sche Sche left. nam	executory contracted and Executory Contracted and Executor Attach the Contine and case number 1: List All	of Your PRIORITY Ur	that could r pired Leases ured by Pro ge. If you have asecured C	result in a claim. Also li (Official Form 106G). D perty. If more space is r ve no information to rep	st executory contract o not include any cre needed, copy the Part	s on Schedule A/B: F ditors with partially s you need, fill it out, i	Property (Official For secured claims that number the entries	orm 106A/B) and on are listed in in the boxes on the
1.	Do any creditor: ☐ No. Go to Pa	s have priority unsecure	d claims aga	ainst you?				
	Yes.	11. 2.						
2.	List all of your pidentify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	as both priori er according	ty and nonpriority amount to the creditor's name. If y	s, list that claim here a you have more than tw	nd show both priority a	ind nonpriority amou	nts. As much as
	(For an explanati	ion of each type of claim, s	see the instru	uctions for this form in the	instruction booklet.)	Total claim	Priority	Nonpriority
2.1	Illinois D	epartment of Reve	nue	Last 4 digits of accour	nt number	\$0.00	amount \$0.0	amount \$0.00
	Priority Cred P.O. Box	ditor's Name 1 19035		When was the debt inc	curred?			
		eld, IL 62794 eet City State Zip Code		As of the date you file,	, the claim is: Check a	ıll that apply		
	Who incurred	the debt? Check one.		☐ Contingent				
	Debtor 1 on	ly		☐ Unliquidated				
	Debtor 2 on	ly		☐ Disputed				
	Debtor 1 an	d Debtor 2 only		Type of PRIORITY uns	ecured claim:			
	☐ At least one	of the debtors and anothe	er	☐ Domestic support ob	oligations			
	☐ Check if th	is claim is for a commu	nity debt	■ Taxes and certain of	-	-		
		bject to offset?		☐ Claims for death or p	personal injury while yo	u were intoxicated		
	■ No □ Yes			Other. Specify				_
	Li res							
2.2				Last 4 digits of accour	nt number	\$0.00	\$0.0	\$0.00
	P.O. Box			When was the debt inc	curred?		_	
		ohia, PA 19101 eet City State Zip Code		As of the date you file,	, the claim is: Check a	ıll that apply		
	Who incurred	the debt? Check one.		☐ Contingent				
	Debtor 1 on	ly		☐ Unliquidated				
	Debtor 2 on	ly		☐ Disputed				
	Debtor 1 an	d Debtor 2 only		Type of PRIORITY uns	ecured claim:			
	☐ At least one	of the debtors and another	er	☐ Domestic support ob	oligations			
	Is the claim su	is claim is for a commu bject to offset?	nity debt	■ Taxes and certain of ☐ Claims for death or p		=		
	■ No □ Yes			Other. Specify				_

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Debtor 1 Sabrina Lofton Case number (if known) 22-08901

Part	2: List All of Your NONPRIORITY Unsecu	red Claims					
3. I	Oo any creditors have nonpriority unsecured claim	s against you?					
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.							
ı	Yes.						
t	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what t	ype of claim it is. Do not list claims already incl	luded in Part 1. If more Continuation Page of			
	1			Total claim			
4.1	American First Finance Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$0.00			
	Attn: Bankruptcy Po Box 565848 Dallas, TX 75356	When was the debt incurred?	Opened 3/05/19 Last Active 3/07/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	☐ Debts to pension or profit-sharing					
	Yes	Other. Specify Secured					
4.2	Capital One	Last 4 digits of account number	0491	\$0.00			
	Nonpriority Creditor's Name Attn: Bnakruptcy P.O. Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/05/19 Last Active 12/01/20				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharin	,				
	Yes	Other. Specify Credit Card					

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Case number (if known)

22-08901

4.3 \$290.00 Chimef/str Last 4 digits of account number 4779 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/20 Last Active Po Box 417 When was the debt incurred? 7/01/22 San Francisco, CA 94104 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Line Secured ☐ Yes 4.4 Last 4 digits of account number City of Chicago Dept of Finance Unknown Nonpriority Creditor's Name 121 N. LaSalle Street, 7th Floor When was the debt incurred? Chicago, IL 60602 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.5 **Clerk of the Circuit Court of Cook** Last 4 digits of account number Unknown Nonpriority Creditor's Name 50 W. Washington St. When was the debt incurred? Chicago, IL 60602 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Debtor 1 Sabrina Lofton

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Sabrina Lofton Case number (if known) 22-08901

Debtor	1 Sabrina Lofton		Case number (if known) 22-08901		
4.6	Commonwealth Edison Company Nonpriority Creditor's Name	Last 4 digits of account number		Unknown	
	1919 Swift Drive	When was the debt incurred?			
	Oak Brook, IL 60523				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	_	П			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	ط مامام		
	At least one of the debtors and another	Student loans	u ciaiii.		
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify			
4.7	Famsa Inc	Last 4 digits of account number	8890	\$0.00	
	Nonpriority Creditor's Name				
	Attn: Bankruptcy 2655 Villa Creek	When was the debt incurred?	Last Active 06/15		
	Farmers Branch, TX 75234				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure			
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims			
	No	Debts to pension or profit-shari			
	Yes	•			
	☐ Yes	Other. Specify Charge Ac	Count		
4.8	Fedloan	Last 4 digits of account number	0007	\$3,081.00	
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 10/21 Last Active		
	Po Box 69184	When was the debt incurred?	5/01/22		
	Harrisburg, PA 17106				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	_	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	·			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify			

Educational

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Debtor	Sabrina Lofton		Case number (if known) 22-08901	
4.9	First Premier Bank	Last 4 digits of account number	6472	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524	When was the debt incurred?	Opened 11/03/16 Last Active 11/26/16	
	Sioux Falls, SD 57117 Number Street City State Zip Code	As of the date you file, the claim		_
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Care	d	_
4.1	Honor Finance	Lock 4 digits of cooperat we when		\$0.00
0	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.00
	4751 Wilshire Blvd, Suite 100 Los Angeles, CA 90010	When was the debt incurred?		_
-	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify	_	
4.1	Illinois Department of Employment			Unknown
1	Nonpriority Creditor's Name	Last 4 digits of account number		Ulikilowii
	PO Box 4385	When was the debt incurred?		_
	Chicago, IL 60680	A control of the state of the s		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Cneck all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		

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Debtor 1 Sabrina Lofton Case number (if known) 22-08901 4.1 Illinoisse 2304 \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 05/13 Last Active When was the debt incurred? 07/13 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Jefferson Capital Systems, LLC Unknown Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 7999 Saint Cloud, MN 56302-9617 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacktriangle Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 National Credit Adjusters, LLC Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 3023 When was the debt incurred? Hutchinson, KS 67504 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Case number (if known)

22-08901

4.1 **Peoples Gas** Unknown Last 4 digits of account number 5 Nonpriority Creditor's Name 200 E Randolph Street When was the debt incurred? Chicago, IL 60601 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Pinnacle Service Solutions LLC** Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name 4408 Milestrip Rd, #247 When was the debt incurred? Buffalo, NY 14219 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 7 **Prestige Financial Services** Unknown Last 4 digits of account number Nonpriority Creditor's Name 1240 S. 500 W. When was the debt incurred? Salt Lake City, UT 84115 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Debtor 1 Sabrina Lofton

Other. Specify

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Page 16 of 25 Document Debtor 1 Sabrina Lofton Case number (if known) 22-08901 4.1 **Quantum3 Group LLC** Unknown Last 4 digits of account number 8 Nonpriority Creditor's Name P.O. Box 788 When was the debt incurred? Kirkland, WA 98083 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Self Financial/lead Ba 5224 Last 4 digits of account number \$0.00 9 Nonpriority Creditor's Name Opened 01/22 Last Active 901 E. 6th Street When was the debt incurred? 4/23/22 Austin, TX 78702 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Secured ☐ Yes 4.2 **Social Security Administration** Unknown Last 4 digits of account number 0 Nonpriority Creditor's Name 1500 Woodlawn Drive When was the debt incurred? Baltimore, MD 21241 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No ☐ Yes

 \square Check if this claim is for a community

Is the claim subject to offset?

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

Other. Specify

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Case number (if known)

Debtor 1 Sabrina Lofton 22-08901 4.2 Synchrony Bank/Care Credit 9283 \$2,200.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/21 Last Active Attn: Bankruptcy Dept Po Box 965064 When was the debt incurred? 1/19/22 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other, Specify Charge Account 4.2 **Tmobile** \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 37380 When was the debt incurred? Albuquerque, NM 87176 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Total Visa/The Bank of Missouri 9776 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 1/26/17 Last Active Attn: Bankruptcy Po Box 85710 When was the debt incurred? 3/07/18 Sioux Falls, SD 57118 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

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			Document	Page 18 of 25		
Debtor 1	Sabrina Lofton			Case number (if known)	22-08	901

Debioi	- Sabilia Lolton		22-08901	
4.2	U.S. Bankcorp	Last 4 digits of account number	0961	\$5.00
	Nonpriority Creditor's Name Attn: Bankruptcy 800 Nicollet Mall Minneapolis, MN 55402	When was the debt incurred?	Opened 11/16 Last Active 7/21/22	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	□ Disputed Type of NONPRIORITY unsecured □ Student loans □ Obligations arising out of a separeport as priority claims □ Debts to pension or profit-sharin ■ Other. Specify Credit Card	ration agreement or divorce that you did not g plans, and other similar debts	
4.2	U.S. Department of Education Nonpriority Creditor's Name c/o FedLoan Servicing	Last 4 digits of account number When was the debt incurred?		Unknown
	PO Box 69184 Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	_		
4.2	Verizon Wireless Nonpriority Creditor's Name	Last 4 digits of account number	}	\$0.00
	PO Box 4846 Trenton, NJ 08650	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Case number (if known) Debtor 1 Sabrina Lofton 22-08901 have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? American First Finance, LLC Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 3002 ■ Part 2: Creditors with Nonpriority Unsecured Claims Malvern, PA 19355 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Prestige Financial Services** Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Bo 26707 ■ Part 2: Creditors with Nonpriority Unsecured Claims Salt Lake City, UT 84126 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Verizon Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 4515 N. Santa Fe Ave. ■ Part 2: Creditors with Nonpriority Unsecured Claims Oklahoma City, OK 73118

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 3,081.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.		6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 2,495.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 5,576.00

Last 4 digits of account number

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Fill in this infor	mation to identify your	case:		
Debtor 1	Sabrina Lofton			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
_	22-08901			
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

Residential Lease - Yearly - Term Ends April 2023
1347 W. Washington Blvd, Ste 1B
Chicago, IL 60607

Fill in this	information to identify your	case:			
Debtor 1	Sabrina Lofton				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ber 22-08901				
(if known)					☐ Check if this is an amended filing
Official	l Form 106H			_	
	ule H: Your Cod	ebtors			12/15
■ No □ Yes 2. With Arizon:	you have any codebtors? (If hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. b. Did your spouse, former spouse,	ı lived in a community p ı Nevada, New Mexico, Pu	r operty state or territor lerto Rico, Texas, Wash	y? (Community property si	tates and territories include
in line Form out Co	2 again as a codebtor only i	f that person is a guarar Form 106E/F), or Sched	ntor or cosigner. Make	sure you have listed the o 06G). Use Schedule D, Sc	vith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill tor to whom you owe the debt hat apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
				Outrodule Date	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	

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Eill	in this information to identify your c	ace.							
	btor 1 Sabrina Lof								
	btor 2 buse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	ze number 22-08901		-			Check if this is: An amende A supplement 13 income a	d filing ent showin	ng postpetition	
0	fficial Form 106I					MM / DD/ Y		J	
S	chedule I: Your Inc	ome							12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not filing w	ng jointly, and your ith you, do not inclu	spouse i de inforr	s livi natio	ing with you, inclu on about your spo	ude inforr use. If m	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fi	iling spouse	
	If you have more than one job,	Employment status	☐ Employed		☐ Emplo	☐ Employed			
	attach a separate page with information about additional employers.	Employment status	■ Not employed	yed			☐ Not employed		
	Include part-time, seasonal, or	Occupation							
	self-employed work.	Employer's name	-						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any I	ine, write \$0 in the	space. In	clude your noi	n-filing
•	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	mplo	yers for that perso	n on the li	nes below. If	you need
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Sabrina Lofton	=	C	Case number (<i>if kr</i>	nown)	22-08	3901		
					For Debtor 1			Debtor 2 -filing sp		
	Cop	by line 4 here	4.		\$ (0.00	\$		N/A	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		·	0.00	\$_		N/A	-
	5c.	Voluntary contributions for retirement plans	5c.		·	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d			0.00	\$		N/A	_
	5e.	Insurance	5e		\$	0.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.00	\$		N/A	-
	5g.	Union dues	5g			0.00	\$		N/A	- -
	5h.	Other deductions. Specify:	5h	.+	\$(0.00	+ \$		N/A	-
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0.00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0.00	\$		N/A	_
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a			0.00	\$		N/A	_
	8b.	Interest and dividends	8b		\$	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ (0.00	\$		N/A	
	8d.	Unemployment compensation	8d			0.00	\$		N/A	_
	8e.	Social Security	8e		\$ 2,300		\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: LINK	e 8f.		\$ 325	5.00	\$		N/A	-
	8g.	Pension or retirement income	8g		\$ (0.00	\$		N/A	-
	8h.	Other monthly income. Specify:	8h	.+	\$	0.00	+ \$		N/A	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,625	5.00	\$		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,625.00	+ \$		N/A	= \$	2,625.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			_,,					,
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		.,		•	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	2,625.00
13.	Do	you expect an increase or decrease within the year after you file this form	?							y income
		No.								
		Yes, Explain:								

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Fill	in this information to identify your case:			
	otor 1 Sabrina Lofton		heck if this is:	
	Sabilia Lolloli			
	otor 2ouse, if filing)	□		wing postpetition chapter the following date:
` '				
Unite	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		MM / DD / YYYY	
	ze number 22-08901 (nown)			
Of	fficial Form 106J			
Sc	chedule J: Your Expenses			12/15
info nun	as complete and accurate as possible. If two married people are filing ormation. If more space is needed, attach another sheet to this form. (mber (if known). Answer every question.			
Part	rt 1: Describe Your Household Is this a joint case?			
1.	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?			
	□ No			
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Se	parate Household of D	Debtor 2.	
2.	Do you have dependents? ☐ No			
		endent's relationship to tor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents names.	ld	13	Yes
				□ No □ Yes
				□ No
				☐ Yes
				□ No
3.	Do your expenses include			☐ Yes
Э.	expenses of people other than yourself and your dependents?			
exp	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are benses as of a date after the bankruptcy is filed. If this is a supplement plicable date.			
the	clude expenses paid for with non-cash government assistance if you keep value of such assistance and have included it on Schedule I: Your Interior 1061.)		Your exp	enses
•	·			
4.	The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.		. \$	600.00
	If not included in line 4:			
	4a. Real estate taxes	4a	. \$	0.00
	4b. Property, homeowner's, or renter's insurance		. \$	0.00
	4c. Home maintenance, repair, and upkeep expenses		. \$	0.00
5.	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home equ		. \$. \$	0.00

Deb	otor 1	Sabrina Lofton	Case number (if known)	22-08901
6.	Utilit	ies:		
٠.	6a.	Electricity, heat, natural gas	6a. \$	150.00
	6b.	Water, sewer, garbage collection	6b. \$	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	235.00
	6d.	Other. Specify:	6d. \$	0.00
7.	Food	d and housekeeping supplies	7. \$	550.00
8.		dcare and children's education costs	8. \$	0.00
9.		ning, laundry, and dry cleaning	9. \$	50.00
10.		onal care products and services	10. \$	25.00
		ical and dental expenses	11. \$	50.00
12.	Trans	sportation. Include gas, maintenance, bus or train fare.	· 	
		ot include car payments.	12. \$	150.00
13.	Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
14.	Char	itable contributions and religious donations	14. \$	0.00
15.	Insur	rance.		
		ot include insurance deducted from your pay or included in lines 4 or 20		
		Life insurance	15a. \$	0.00
	15b.	Health insurance	15b. \$	0.00
	15c.	Vehicle insurance	15c. \$	125.00
		Other insurance. Specify:	15d. \$	0.00
16.		s. Do not include taxes deducted from your pay or included in lines 4 c		
	Spec	•	16. \$	0.00
17.		illment or lease payments:	47 6	
		Car payments for Vehicle 1	17a. \$	545.00
		Car payments for Vehicle 2	17b. \$	0.00
		Other. Specify:	17c. \$	0.00
		Other. Specify:	17d. \$	0.00
18.		payments of alimony, maintenance, and support that you did not		0.00
10		acted from your pay on line 5, Schedule I, Your Income (Official Fo or payments you make to support others who do not live with you.	· · · · · · · · · · · · · · · · · · ·	
19.	Spec		19.	0.00
20		तापृ. er real property expenses not included in lines 4 or 5 of this form o		
20.		Mortgages on other property	20a. \$	0.00
		Real estate taxes	20b. \$	0.00
		Property, homeowner's, or renter's insurance	20c. \$	0.00
		Maintenance, repair, and upkeep expenses	20d. \$	0.00
		Homeowner's association or condominium dues	20d. \$	
21			21. +\$	0.00
۷١.	Otne	r: Specify:	21. +\$	0.00
22.	Calc	ulate your monthly expenses		
	22a.	Add lines 4 through 21.	\$	2,480.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Forn	n 106J-2 \$,
		Add line 22a and 22b. The result is your monthly expenses.	\$ 	2,480.00
		Add into 224 dria 225. The recall to your menting expenses.		2,400.00
23.		ulate your monthly net income.		
		Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,625.00
	23b.	Copy your monthly expenses from line 22c above.	23b\$	2,480.00
	23c.	Subtract your monthly expenses from your monthly income.	22-	145.00
		The result is your <i>monthly net income</i> .	23c. \$	145.00
24	Do	ou evnest an ingresse or degrades in your sympass within the	ar after you file this form?	
∠ 4.		ou expect an increase or decrease in your expenses within the ye xample, do you expect to finish paying for your car loan within the year or do you		rease or decrease because of a
		ication to the terms of your mortgage?	Sample of the stage of the stag	222 3. 400.0400 5004450 01 4
	■ No	0.		
	Пу			